

ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

St Francis Hospital MooresvilleCity: Mooresville County: Morgan Year: **2004**

Provider Type: General Acute Hospital

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Med/Surg	0	0	0	\$0
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	45	1,716	5,815	\$2,000
Neonatal Intermed	0	0	0	\$0
Obstetrics	15	581	1,450	\$5,980
Pediatric	0	0	0	\$0

Psychiatric	0	0	0	\$0
Rehabilitation	0	0	0	\$0
Substance Abuse	0	0	0	\$0
Swing Beds	NA	441	507	\$789
Other Services	0	0	0	NA
Acute Subtotal	60	2,738	7,772	NA
Normal Newborn	11	532	1,174	\$2,959

II. Outpatient Visits			
Circulatory System	3,231	Digestive System	2,609
Endocrine System	4,017	Injuries and Poison	5,207
Mental Disorder	329	Musculoskeletal	4,453
Neoplasms	1,707	Nervous	2,013
Respiratory	5,493	Urinary	2,891
Other/Unknown	25,824	Total Visits	57,774
Number of Visits to Emergency Department			0
Percent of Emergency Department Visits of Total Visits			0.0%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

N - Ambulance Service (Owned)	N - Alcohol/Drug Service	Y - Anesthesia Services
N - Audiology	Y - Blood Bank	N - Cardiac Cath Lab
N - Cardiac-Thoracic Surgery	N - Chemotherapy Service	N - Chiropractic Service
N - CT Scanner	N - Dental Service	Y - Dietetic Service
N - Extracorporeal Lithotripter	N - Gerontological Service	N - Home Health Service
N - Hospice	Y - Laboratory Anatomical	Y - Laboratory Clinical
N - Magnetic Resonance (MRI)	Y - Neonatal Nursery	N - Neurosurgical Service
Y - Nuclear Medicine	N - Occupational Therapy	Y - Operating Room
N - Ophthalmic Surgery	N - Optometric Service	N - Organ Bank
N - Organ Transplant	N - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	N - PET Imaging	Y - Postoperative Recovery
N - Psychiatric Emergency	N - Psychiatric Child	N - Psychiatric Forensic
N - Psychiatric Geriatric	Y - Radiology Diagnostic	N - Radiology Therapeutic
N - Reconstructive Surgery	Y - Respiratory Care	N - Rehab Inpat CARF
N- Rehab Inpat Non CARF Acc	N- Rehab Outpatient	N- Renal Dialysis

Y - Social Services	N - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	N - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
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